PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE FALLARIANSES, FLORIDA 1. Coopposition Name ELASTO POOL USA CORP 4. 2002 FISHER ISLAND DRIVE 2. Principal Office Address 4. 2002 FISHER ISLAND DRIVE 3. Melting Office Address 4. Date incorporated or Qualified 10.100 Spanness in Funds Q4(01/1998) 5. FEN Immibrat 6. Suite, Apr. II, etc. 4. Date incorporated or Qualified 10.100 Spanness in Funds Q4(01/1998) 5. FEN Immibrat 6. Suite, Apr. II, etc. 4. Date incorporated or Q4(01/1/1998) 5. FEN Immibrat 6. Suite, Apr. II, etc. 5. FEN Immibrat 6. Suite, Apr. II, etc. 7. Name and Address of Current Registered Agent Name DENAIN, CEDRIK Street Address (P.O. Box Numbers is Not Approximate) 7. Name and Address of Current Registered Agent 1. Deeps appointed the registered agent of the above passed corporation, an familiar with and accept the obligations of section 607 0505 or 617 0500, F.S. Signature of Denain, CEDRIK 9. Names and Address of Each Office and/or Director (Fibrida nonprofit corporations must bit at least 3 directors) Name of Officer and/or Directors 1. Deeps appointed the registered agent of the above passed corporation, an familiar with and accept the obligations of section 607 0505 or 617 0500, F.S. 1. Deeps appointed the registered spent of the above passed corporation must bit at least 3 directors) Name of Officer and/or Directors 1. Deeps appointed the registered spent of the above passed corporation must bit at least 3 directors) 1. Deeps appointed the registered agent of the above passed opporation of the corporation must be at least 3 directors) 1. Deeps appointed the registered agent of the above passed opporation of the corporation must be at least 3 directors) 1. Deeps appointed the registered agent of the above passed opporation of the corporation must be at least 3 directors) 1. Deeps appointed the registered of the above passed opporation of the corporation must be registered as from the corporation of the corp		PORATION STATEM	2			S	ecretary	TMENT OF State ORPORATIONS	STATE			FILE	PH 2:		
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20 33109. Country 33109. Country 33109. Country USA 7. Name and Address of Current Registered Agent Name DENAIN, CEDRIK Street Address (P.O. Box Number is Not Acceptable) 42202 FISHER ISLAND DRIVE Sule, Apr. #, Etc. City FISHER ISLAND 8. I. being appointed the registered agent of the above ngased corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent PECKTEFED AGENT MUST SIGN 9. Names and 9ffold Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Officers and/or Directors Officers and or Directors Officers and/or Direc	•					City & State				5. FEI Number Applied For					
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